2018/19 Schuylkill Valley Swim & Dive Team Registration

REGISTRATION				
Athlete's name	Gender	DOB	Shirt size	Fee
1	M F		YS YM YL AS AM AL AXL	\$
2	M F		YS YM YL AS AM AL AXL	
3	M F		YS YM YL AS AM AL AXL	
4	M F		YS YM YL AS AM AL AXL	
5	M F		YS YM YL AS AM AL AXL	
6	M F		YS YM YL AS AM AL AXL	

To	ota		

1st Swimmer \$125.00

Each add'l swimmer \$100.00

Swimming & Diving \$150.00

Diving Only \$75.00

Swim Caps Order	Qty	Cost	Total
2 Caps w/ Logo & Name \$27 1 Cap w/ Logo Only \$10		\$	
FAMILY EMAIL ADDRESS:		_	

Checks made payable to SVPAC

GRAND TOTAL DUE	
Check Number	
Cash	

Funds Collected
By

Schuylkill Valley Parents Aquatic Club

Volunteer Fund Agreement

1. Purpose

a. This is a PARENT run organization, and to be a successful organization we need ALL PARENTS to contribute.

2. How it works

- a. Each family turns in a \$50.00 check to be held by the Financial Secretary and returned upon completion of duties. These duties consist of volunteering or providing a hot food item at:
 - three (3) dual meets (there are 6 dual meets available during the season), AND
 - The Schuylkill Valley Rock the Block Invitational
- b. Use TeamSnap to sign up for your volunteer duties
 - If you have a question about an assignment please ask
 - Don't be afraid of timing we will show what to do
- c. A board member confirms each volunteer requirement is fulfilled
- d. Volunteer check will be returned at the Team Party at the end of the season to all families that have completed of all Volunteer requirements (3 dual meet and 1 Rock the Block)
- 3. Hot Food Day of the Event
 - a. Philly soft pretzels bring them day of. They can be ordered the day before and will be waiting for you in the morning. They open at 7 so you can stop on your way to the meet.
 - b. Hot Food: Mac & Cheese, Taco meat, etc. Please bring with you the day of the event in a crockpot labeled with your name preferably already warm.
- 4. Donation Form voluntary list of supplies we need to run our meets
- 5. Rock The Block assignments will be posted by Dec. 1st
- 6. For Dual Meets please only sign up for 3 assignments until Nov. 29th. After that you can do as many as you like

By signing this I agree to either fulfill my volunt	teer requirements or forfeit	my Volunteer Fund check	to SVPAC.
Signature (parent/legal guardian)		Date	
Signature (parent/legal guardian)		Date	
			1
	Check #		
	Rec'd By:		



SWIMMING AND DIVING

2018 MEMBER INFORMATION CARD

Athlete's Name			
Address			
City	Zip Code		
Date of Birth (MM/DD/YYYY)	Ag	e on Dec 1, 2018	
Home Phone Number		Male or Female	
Father's Name			
Father Work/Cell Number			
Father E-mail Address	<u> </u>		
Mother's Name			
Mother Work/Cell Number			
Mother E-mail Address			
PLEASE CON	TACT IN CASE OF EM	ERGENCY (Circle On	e)
Home Phone	Father Work/Cell Phone	Mother W	ork/Cell
Health Insurance Company Name	9		
Policy Holders NameID			
Number	Group Num	ber	
I/We hereby give my/our permission for the large will not hold the Schuylkill Valley	or our child/children to participate in al Parents Aquatics Club responsible fo	SV Swim Team functions for the 2015 any injuries while involved in swim te	8/19 season. am functions.
Parent Sig	gnature	Date	

2018/2019 SV Age Group Swim and Dive Team Consent/Release/Agreement Form

Participation Consent:		
	dersigned parent(s)/guardian(s) of	
·	o participate in all of SV Age Group Swim and Dive 1	
·	ve assume all risks and hazards incidental to such pa	
<u> </u>	Team, the Schuylkill Valley Aquatics Parents Aqua	•
•	y coach, board member, employee, volunteer, or all	
	eam, Schuylkill Valley Parents Aquatics Club (SVPAC	·
	Age Group Swim and Dive Team program and activi	•
	ses sustained as a result of the above named youth	•
	from any such event, practice, or meet. Further, in	-
	nd hold harmless the aforementioned organizations	· · · · · · · · · · · · · · · · · · ·
	I/or expenses of any kind arising out of participatior negligence or for any other cause.	
whether such damages are the result of	megligence of for any other cause.	initial
Medical Consent:		
	ersigned parent(s)/guardian(s)of	hereby
	aminations including X-rays, medical or surgical diag	
-	ember of the medical staff and emergency room sta	
	r a Dentist licensed under the provisions of the Den	
	ng a current license to operate a hospital from the S	
,	at this authorization is given in advance of any spec	•
•	n to provide authority and power to render care wh	
	ent may deem advisable. It is understood that every	
	ng treatment to the patient, but that any of the abo	
withheld if the undersigned cannot be re		We treatment will not be
withheld if the undersigned carmot be re	milai	
Photography Release:		
I/we,,	the undersigned parent(s)/guardian(s)of	hereby authorize
and consent to the use of the above nam	ned youth as well as myself in visual image by the S\	VPAC for appropriate
purposes, including but not limited to: st	ill photography, videotape, electronic and print pub	olications and websites. I/we
hereby release and hold harmless SVPAC	from any reasonable expectation of privacy or con	fidentiality associated with
the images specified above. I/we further	acknowledge that my and the above named youth	participation is voluntary
and that I/we will not receive financial co	ompensation of any type associated with the taking	or publication of these
photographs or participation in organiza	tion marketing materials or other organization publ	ications. I/we acknowledge
and agree that publication of said photo	s confers no rights of ownership or royalties whatso	ever. I/we hereby release
SVPAC and any third parties involved in t	the creation or publication of marketing materials, f	rom liability for any claims
by me/us or any third party in connection	n with my/our participationInitial	
Financial Agreement:		
_	e undersigned parent(s)/guardian(s)of	hereby agree
	ve named youth and make all payments for all SV Ag	
	nce to the set due date unless other arrangements	•
	edge if payment is not received by the set due date	
	oup Swim and Dive Team swimming/diving meets o	•
-	esulting from my/our deposited checkInit	_
Telliburse the SVFACTOL any bank lees i	esuiting from my/our deposited check.	Liai
Printed Name	Signature	Date
Printed Name	Signature	Date



Instructions

Now that you have registered for the team, you will receive an invitation to join Schuylkill Valley Age Group Swim Team on TeamSnap.

TeamSnap is how the organization will keep you up to date on all the important information regarding the team. After you have joined SV Age Group Swim Team you will be able to:

Receive alerts and emails on your phone or desktop regarding team

Be able to sign up for volunteer assignments – Once you sign up to volunteer for a meet you will receive a reminder alert/email a couple days to remind you what you volunteered for.

Enter your swimmers availability for meets - You will go to see this tab and click the boxes letting the coaches know the meets your swimmer is attending or not attending. Swimmers are expected to attend all dual meets if they are not available please add a note stating why.

Access files such as Spiritwear information or dual meet/invitational results

Free download of Teamsnap for iPhone and Android available.

We will have more information regarding the team's use of TeamSnap at our first parents meeting.